

File with:
Secretary of State
State Capitol, 7th Floor
1700 W. Washington Street
Phoenix, AZ 85007-2808

Attn: Elections Services Division

ARIZONA
PUBLIC BODY*
REGISTRATION
FOR LOBBYING
A.R.S. § 41-1232.01 (A) (D)

ARE LOBBYISTS COMPENSATED?
IF SO, CHECK BOX AND ATTACH
CHECK FOR \$25 TO:
ARIZONA SECRETARY OF STATE ☐

INITIAL REGISTRATION ☐
RENEWAL OF REGISTRATION ☐

Please type or print clearly.

PUBLIC BODY ID NUMBER:		
NAME OF PUBLIC BODY *:	BUSINESS TELEPHONE #:	BUSINESS FAX #:
BUSINESS ADDRESS:	CITY	STATE ZIP CODE

NAME OF DESIGNATED PUBLIC LOBBYIST *:	BUSINESS TELEPHONE #:	BUSINESS FAX #:
BUSINESS ADDRESS:	CITY	STATE ZIP CODE

- Expenses for which designated public lobbyist is to be reimbursed: (Check all that apply)

☐ Meals ☐ Travel ☐ Lodging ☐ Out of Pocket Expenses
☐ Other (Please describe) _____

Check box and attach Schedule B if public body engages authorized public lobbyists other than designated public lobbyist.

☐

Check box and attach Schedule C to list additional employees who lobby for this public body.

☐

➔ **NOTICE:** Within five (5) business days of any changes, amended forms must be filed. [§41-1232(C)]

STATE OF _____)
COUNTY OF _____) ss

I, the undersigned, being duly sworn, state that this Public Body Registration for Lobbying is complete and that to the best of my knowledge and belief the information above is true and correct.

Signature of Designated Public Lobbyist

SUBSCRIBED AND SWORN TO (Affirmed) before me on _____
Date

My Commission Expires

Notary Public